



Xerox Docket No. D/A4004

**PATENT APPLICATION**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Guerino G. SACRIPANTE et al.

Application No.: 10/765,327

Filed: January 28, 2004

Docket No.: 118410

For: EMULSION AGGREGATION PROCESS FOR FORMING POWDER COATING COMPOSITIONS, POWDER COATING COMPOSITIONS AND METHOD FOR USING THE SAME

**PRELIMINARY AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Please consider the following:

**Amendments to the Specification;**

**Amendments to the Claims** as reflected in the listing of claims;

**Remarks.**

05/27/2004 EAREGAY1 00000076 240037 10765327

01 FC:1201 172.00 DA  
02 FC:1202 360.00 DA  
03 FC:1051 130.00 DA

JFW | 4  
Xerox Docket No. D/A4004PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OLIFF &amp; BERRIDGE, PLC

P.O. Box 19928

Alexandria, Virginia 22320

Telephone: (703) 836-6400

Facsimile: (703) 836-2787

ATTORNEY DOCKET NO.: 118410DATE: May 26, 2004**AMENDMENT TRANSMITTAL**

In re the Application of:

Guerino G. SACRIPANTE et al.

Application No.: 10/765,327

Group Art Unit: unknown

Filed: January 28, 2004

Examiner: unknown

For: EMULSION AGGREGATION PROCESS FOR FORMING POWDER COATING COMPOSITIONS, POWDER COATING COMPOSITIONS AND METHODS FOR USING THE SAME

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The filing fee has been calculated as shown below:

	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL CLAIMS	*40 MINUS	**20	= 20
INDEP CLAIMS *5 MINUS ***3 = 2			
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			

RATE	ADD'L FEE
x 18	\$ 360.00
x 86	\$ 172.00
+ 290	\$
	\$ 532.00

\* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 24-0037 in the amount of \$532.00. Two duplicate copies of this sheet are attached.
- The Commissioner is hereby authorized to charge payment of any filing fees under 37 C.F.R. §1.16 for presentation of extra claims or credit any overpayment to Deposit Account No. 24-0037. Two duplicate copies of this sheet are attached.

DEPOSIT ACCOUNT USE  
AUTHORIZATION  
Please grant any extension  
necessary for entry;  
Charge any fee due to our  
Deposit Account No. 24-0037

Respectfully submitted,

James A. Oliff  
Registration No. 27,075Julie M. Seaman  
Registration No. 51,156